



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Health and Recovery Services Administration, PO Box 45506 Olympia, WA 98504-5506

October 16, 2009

This letter is being sent to you because you currently receive Alien Emergency Medical (AEM) benefits from the Department of Social and Health Services. Beginning November 1, 2009 the medical services you can receive under the AEM program will change.

What is changing?

Effective 11/1/2009, the Department will no longer pay for some services to comply with Federal Law.

What medical services can I receive under AEM?

Effective 11/1/2009, the department will **only** pay for emergency treatment required to treat an emergency condition when that treatment is given in a hospital setting: emergency room, outpatient surgery, or inpatient hospital admission. Emergency transportation and services can also be paid for.

If you are transferred and admitted to a long term acute care facility or a physical medicine and rehabilitation unit for care and we pay for your emergency admission, we will pay for these services, too.

This admission must be prior authorized.

We will also pay for a prescription written on the date you are released or discharged from the hospital if the admission is paid for

How does this affect me?

You are still eligible for coverage to treat an emergency condition in a hospital emergency room, emergency outpatient surgery or emergency inpatient admission until the end of your current certification period. The department will review your medical records to confirm the emergency medical need.

If you received an authorization for a health care service, like a medical supply, this service will continue until the authorization period ends. When the authorization ends, the department can no longer pay for this service.

If you are receiving any of the services listed below under the AEM program now, the department will not pay for them after 11/1/2009.

What medical services can I no longer receive under AEM?

Effective 11/1/2009, the department will no longer pay for any of the services listed below.

- a. Any hospital services, care, surgeries, or inpatient admissions to treat any **non-emergent diagnosis**. This includes any non-emergent care that is delivered during an emergency admission which we pay for.
- b. Any service render outside a hospital settings including but not limited to:
 - Office or clinic based services rendered by a physician, an ARNP or any other licensed practitioner;
 - Lab, radiology and any other diagnostic testing;
 - Personal care services;
 - Physical, respiratory, occupational, and speech therapy services;
 - Home health services;
 - Hospice services;
 - Vision services;
 - Hearing services;
 - Dental services;
 - Durable and non durable medical supplies;
 - Non- emergent transportation,
 - Interpretative services, and
 - Retail pharmacy services

If you receive a service outside of a hospital setting or in a hospital setting that are not emergent, your provider may bill you for the service.

If you disagree with any of our decisions, you may ask to have the case reviewed. You can also ask for an administrative hearing. Administrative hearing rights are included in this letter.

More detail about these changes can be found in WAC 388-438-0110 and 388-438-0115.

If you are diagnosed with cancer, require kidney dialysis or nursing home care, you may apply for alien medical benefits to cover the treatment you may need.

If you have questions call please call our Medical Assistance Customer Service Center at 1-800-562-3022, available 7 a.m. to 6 p.m. Monday through Friday. Additional information is available at the HRSA Web site at <http://maa.dshs.wa.gov>.